

IN THE UNITED STATES BANKRUPTCY COURT FOR
THE DISTRICT OF PUERTO RICO

IN THE MATTER OF:

**CHARLEZ MARTINEZ FONTANEZ
AMARILIS SEMIDEY ALICEA**

Debtor

CASE NO.: 20-02518-**BKT**

CHAPTER 13

STATEMENT OF PURPOSE TO AMEND SCHEDULE I and J

TO THE HONORABLE COURT:

NOW COMES debtor through the undersigned counsel and respectfully alleges and prays:

1. In compliance with Federal Rule of Bankruptcy Proceeding 1009 and Local Bankruptcy Rule 1009-1, debtor provides a Statement Purpose as to the amended the Schedule I and J.
2. Also debtor is filing an amend Schedule I to include \$50.00 his prorated Christmas Bones and an amend Schedule J to disclose his current expenses.

WHEREFORE, debtor prays this Honorable Court to grant this Honorable Court to be acknowledged of this motion and take note of the amendments.

CERTIFICATE OF ELECTRONIC FILING AND SERVICE

*I hereby certify that on this date copy of this motion has been electronically filed with the Clerk of the Court using the CM/ECF system which will send notification of such filing to **JOSE RAMON CARRION MORALES**, and also certify that I have mailed by United States Postal Service copy of this motion to the non CM/ECF participants.*

RESPECTFULLY SUBMITTED.

In Guayama, Puerto Rico, this 24th day of July, 2020.

/s/MANUEL E. FUSTER MARTINEZ
ATTORNEY FOR DEBTOR
USDC-PR 200513
PO BOX 1464
GUAYAMA, P.R. 00785
PHONE: (787) 864-3015
FAX: (787) 866-1827
E-MAIL fuster_law_office@yahoo.com

Fill in this information to identify your case:

Debtor 1 CHARLES MARTINEZ FONTANEZ

Debtor 2 AMARILIS SEMIDEY ALICEA
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO

Case number 20-02518
(If known)

Check if this is:

☒ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 1061

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
	Occupation	SECURITY GUARD	OCCUPATIONAL THERAPIST
Include part-time, seasonal, or self-employed work.	Employer's name	SECURITAS SECURITY SERVICES OF PR INC	COOP DE TERAPEUTAS ASOCIADOS DE PR
	Employer's address	TRES RIO BLDG 27 GLZ GIUSTI ST SUITE 601 San Juan, PR 00936	SECT LA LINEA HC 63 BOX 3984 Patillas, PR 00723
Occupation may include student or homemaker, if it applies.	How long employed there?	5 YEARS	4 YEARS

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$ 584.62	\$ 1,033.79
3. Estimate and list monthly overtime pay.	3.	+\$ 50.00	+\$ 0.00
4. Calculate gross income. Add line 2 + line 3.	4.	\$ 634.62	\$ 1,033.79

Debtor 1
Debtor 2

CHARLES MARTINEZ FONTANEZ
AMARILIS SEMIDEY ALICEA

Case number (if known)
20-02518

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	4. \$ 634.62	\$ 1,033.79	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a. \$ 192.80	\$ 97.82	
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00	
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00	
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00	
5e. Insurance	5e. \$ 0.00	\$ 0.00	
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00	
5g. Union dues	5g. \$ 0.00	\$ 0.00	
5h. Other deductions. Specify: Other	5h. \$ 0.00	\$ 19.44	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 192.80	\$ 117.26	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 441.82	\$ 916.53	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00	
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00	
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00	
8e. Social Security	8e. \$ 760.00	\$ 0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: PAN Benefits	8f. \$ 0.00	\$ 62.00	
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00	
8h. Other monthly income. Specify:	8h. \$ 0.00	\$ 0.00	
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 760.00	\$ 62.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 1,201.82 + \$ 978.53 = \$ 2,180.35		
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:			11. +\$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ 2,180.35	Combined monthly income	
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain:			

Fill in this information to identify your case:

Debtor 1

CHARLES MARTINEZ FONTANEZ

Debtor 2

AMARILIS SEMIDEY ALICEA

(Spouse, if filing)

United States Bankruptcy Court for the

DISTRICT OF PUERTO RICO

Case number

20-02518

(If known)

Check if this is:

☒ An amended filing

☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents?

☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 400.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Official Form 106J

Schedule J: Your Expenses

page 1

Debtor 1 CHARLES MARTINEZ FONTANEZ
Debtor 2 AMARILIS SEMIDEY ALICEA

Case number (if known) 20-02518

6 Utilities:

6a. Electricity, heat, natural gas

6b. Water, sewer, garbage collection

6c. Telephone, cell phone, Internet, satellite, and cable services

6d. Other. Specify:

7. Food and housekeeping supplies

8. Childcare and children's education costs

9. Clothing, laundry, and dry cleaning

10. Personal care products and services

11. Medical and dental expenses

12. Transportation. Include gas, maintenance, bus or train fare.
Do not include car payments.

13. Entertainment, clubs, recreation, newspapers, magazines, and books

14. Charitable contributions and religious donations

15. Insurance.
Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance

15b. Health insurance

15c. Vehicle insurance

15d. Other insurance. Specify:

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: IRS (1040-PR)

17. Installment or lease payments:

17a. Car payments for Vehicle 1

17b. Car payments for Vehicle 2

17c. Other. Specify:

17d. Other. Specify:

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

19. Other payments you make to support others who do not live with you.
Specify:

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property

20b. Real estate taxes

20c. Property, homeowner's, or renter's insurance

20d. Maintenance, repair, and upkeep expenses

20e. Homeowner's association or condominium dues

21. Other: Specify: Lodging (University)

Tolls

22. Calculate your monthly expenses

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23b. Copy your monthly expenses from line 22c above.

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

6a. \$ 100.00

6b. \$ 45.00

6c. \$ 90.00

6d. \$ 0.00

7. \$ 330.00

8. \$ 0.00

9. \$ 50.00

10. \$ 20.00

11. \$ 125.00

12. \$ 400.00

13. \$ 0.00

14. \$ 20.00

15a. \$ 0.00

15b. \$ 0.00

15c. \$ 52.00

15d. \$ 0.00

16. \$ 20.00

17a. \$ 0.00

17b. \$ 0.00

17c. \$ 0.00

17d. \$ 0.00

18. \$ 268.00

19. \$ 0.00

20a. \$ 0.00

20b. \$ 0.00

20c. \$ 0.00

20d. \$ 0.00

20e. \$ 0.00

21. +\$ 100.00

+ \$ 35.00

22a. \$ 2,055.00

22b. \$

22c. \$ 2,055.00

23a. \$ 2,180.35

23b. -\$ 2,055.00

23c. \$ 125.35

☒ No.

☐ Yes. Explain here:

Fill in this information to identify your case:

Debtor 1	CHARLES MARTINEZ FONTANEZ		
	First Name	Middle Name	Last Name
Debtor 2	AMARILIS SEMIDEY ALICEA		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO			
Case number 20-02518			
(if known)			

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

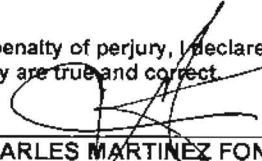
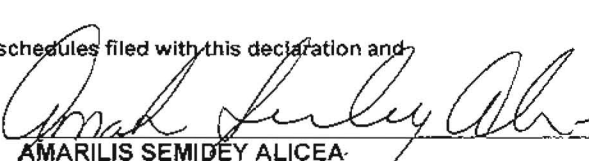
Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X		X	
	CHARLES MARTINEZ FONTANEZ		AMARILIS SEMIDEY ALICEA
	Signature of Debtor 1		Signature of Debtor 2
	Date 07/24/2020		Date